

DUNLAP, CODDING & ROGERS, P.C.

**ATTORNEYS AT LAW
SUITE 1000, THE TOWER
1601 NORTHWEST EXPRESSWAY
OKLAHOMA CITY, OKLAHOMA 73118**

**TELEPHONE
(405) 607-8600**

**FACSIMILE
(405) 607-8686**

F A C S I M I L E M E S S A G E

TO FACSIMILE NO.: 571-273-4926

ATTENTION: John J. Fristoe, Jr.

FROM: Nicholas D. Rouse

**SUBJECT: Serial No. 10/806,000
Atty. Docket No.: 390.032**

DATE: October 25, 2005

PAGES: 4 which includes this transmittal page.

Call (405) 607-8600 should you have any questions regarding this transmittal.

**MESSAGE: As per our telephone conversation, following is the
payment information for the two (2) month extension of
time for the above referenced application.**

**Should you have any questions, please contact me at
your convenience.**

Thank you,

Nicholas D. Rouse

This message is intended for the recipient indicated above. It may contain information which is confidential or protected from disclosure by the attorney-client privilege or work-product doctrine. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are advised that any dissemination, distribution or copying of the communication is strictly prohibited. If you have received this message in error, please mail to DUNLAP, CODDING & ROGERS, P.C., 1601 Northwest Expressway, Suite 1000, Oklahoma City, OK 73118. We will reimburse you for your postage. Thank you.

PTO/SB/21 (09-04)

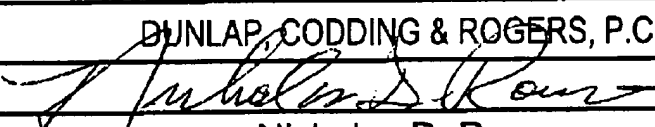
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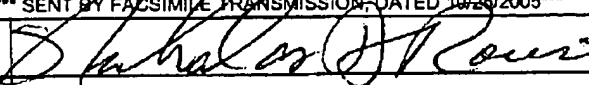
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/806,000
	Filing Date	03/22/2004
	First Named Inventor	John P. Scaramucci
	Art Unit	3751
	Examiner Name	John J. Fristoe, Jr.
Total Number of Pages in This Submission	4	Attorney Docket Number 390.032

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation of POA, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks 1. Fax Cover Sheet (1 pg); 2. 2038 Credit Card Form (1 pg); 3. sb21 Transmittal Form (1 pg); and 4. sb22 Petition for 2 Month Extension of Time (1 pg).		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	DUNLAP CODDING & ROGERS, P.C.		
Signature			
Printed name	Nicholas D. Rouse		
Date	10/25/2005	Reg. No.	36,992

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: *** SENT BY FACSIMILE TRANSMISSION DATED 10/25/2005 ***			
Signature			
Typed or printed name	Nicholas D. Rouse	Date	10/25/2005

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/22 (12-04)

Approved for use through 07/31/2008. OMB 0851-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	
FY 2005		390.032	
<small>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</small>			
Application Number 10/806,000		Filed 03/22/2004	
For VALVE WITH PRESSURE ADAPTABLE SEAT			
Art Unit 3754	Examiner John K. Fristoe, Jr.		

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ <u>225.00</u>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____ I have enclosed a duplicate copy of this sheet.

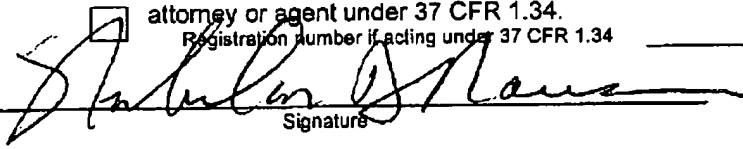
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 36,992

☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____


Signature

10/25/2005
Date

Nicholas D. Rouse
Typed or printed name

405-607-8600
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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